



















**Form 641 – Parts A, B & C**

**ASHNHA Quarterly Project Budget Summary  
& Performance Analysis Reporting Form**

**For All 2009 Denali Commission Approved Projects –  
Projects No. 01150 – A through G**

Project Name: APSCI's Consortium Project for Four Hospitals Oxygen Generating Systems

Name of Hospital / Grant Recipient: Petersburg Medical Center

Reporting Period: October 1 – December 31, 2009

Grant No.: 01150 – A(2)

**641-A. Project Budget Summary** (provide the following information; use additional pages as necessary):

**1. Original Project Budget Information:**

a. The *original total* approved project budget:

i. Amount of Denali Commission Grant Award: \$46,809.00

ii. Amount of Facility Cost Share Match (CSM): \$46,809.00

iii. Original Total Project Cost [line 1(a)(i) plus line 1(a)(ii)]: \$93,618.00

**2. Actual Project Costs Recorded During the Reporting Period:**

a. Amount of the Facility's own Project CSM Expended: \$48,186.00

b. Amount of Commission Grant Funds Received during the reporting period (whether to reimburse or as an advance): \$0

c. Amount of Facility funds expended during the reporting period for which Denali Commission grant funds are being requested on Form 641 to reimburse your hospital for its project expenditures during the reporting period: \$0

d. Total amount of project costs recorded during the reporting period, whether expended, received, or reimbursement sought (add lines 1a, 1b, & 1c): \$48,186.00

**3. Total Denali Commission Grant Funds Received to Date:**

Please report the **total** amount of Denali Commission grant funds **received** (whether received as an advance or as reimbursement for expenses) as of the end of the current reporting period:

\$46,809.00

**4. Total Facility Cost Share Match Funds Expended to Date:**

Please report the **total** amount of hospital funds **expended** (i.e., the hospital's share of the cost of the project for which reimbursement was not and cannot be sought from the Denali Commission) as of the end of the current reporting period:

\$55,827.73

**5. Project Schedule:**

Please state the anticipated start and end dates of this funded 2009 Denali Commission Primary Care in Hospitals project, and provide a list appropriate milestone dates for the major phases or activities of your project.

Start date: June 1, 2009

End date: October 31, 2009

<u>Description of Milestone Or Activity</u>	<u>Anticipated Completion Date</u>
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1. Reorganization of existing oxygen tank storage room – June 30, 2009. Completed.
2. Purchase of oxygen generator – submit purchase order; anticipate arrival of generator mid-August, 2009. Completed.
3. Electrical/circuit modifications for oxygen generator storage room – August, 2009. Completed.
4. Installation and operation of oxygen generator – September 30, 2009. Completed.
5. Final payment for oxygen generator – October 2009. Completed.
- 6.

**641-B. Project Performance Analysis** (add line items to the chart as appropriate):

Project Budget Line Items:	Approved Budget:	Actual Cost:	Scheduled Completion Date:	Actual Work Performed:
APSCI's Consortium Project Oxygen Generator Systems	\$93,618.00	\$102,636.73	Oct. 31, 2009	Order/purchase, installation, and operation of oxygen generator
<b>Totals:</b>	\$93,618.00	\$102,636.73		

**641-C. Facility Certification:**

The preparer of this report, by signing below, certifies on behalf of his or her employer that the information contained herein is accurate and complete to the best of his or her knowledge.

Signature

Date

John Bringham, CEO  
Printed Name and Official Title



Form 642

**ASHNHA's Quarterly Reporting Form  
Covering 2009 Denali Commission Projects  
Numbered 01150 – A through G**

Project Name: APSCI's Consortium Project for Four Hospitals Oxygen Generator System

Hospital: Petersburg Medical Center

Reporting Period: October 1 – December 31, 2009

Denali Commission Grant No.: 01150 - A(2)

**A. Project Narrative** (use additional pages as necessary):

1. What is the status of your 2009 "Primary Care in Hospitals" project as of September 30, 2009? (Please list all project phases completed or milestones achieved during the report period.)  
The project is completed; the oxygen generating system has been operating since September, 2009 with mechanical issues that are being addressed.
2. Is your 2009 project on schedule? If not, what kind of problem(s) does the delay present? How will this be dealt with? Will the delay potentially extend the project beyond 9/30/2011?  
On schedule, installed and completed.
3. Is the 2009 project on budget, or over or under budget? If over budget, how will this be dealt with? What funds is your facility using to cover the additional project costs?  
Over budget. Installation costs and hardware for installation was not estimated into the proposal. These costs will be incurred by the facility.
4. Other comments, problems and solutions:  
The oxygen generating system been fully operational however, there have been some mechanical issues. Servicing for the system has occurred.

**B. Project Fund Disbursement Request**

We are requesting ASHNHA to release \$            \$0            in Denali Commission Grant Funds for our project at this time. *This funding request is either:*

1. /    a request for an Advance against Commission Project Grant Award Funds; **or**
2. /    a request for Reimbursement from Project Grant Award Funds in order to cover project expenses incurred by our hospital during the reporting period.

(Copies of all invoices submitted and checks written in payment must accompany any request for reimbursement; copies of purchase orders or other commitment documents must accompany any request for an advance).

Box 589  
Petersburg, AK 99833

VENDOR NO.: 101751

VENDOR NAME: LUNDGREN FIRE RESCUE EQUI

036863

TRANSACTION DATE	REFERENCE	GROSS AMOUNT	DEDUCTION	NET AMOUNT
09/26/09	306-2009	46,809.05	.00	46,809.05
CHECK DATE	CHECK NO.	TOTAL GROSS	TOTAL DEDUCTION	CHECK AMOUNT
10/16/09	000036863	46,809.05	.00	46,809.05

On Register #: 1088

P.O. 27619	NET 30	BL	BEST WAY	DEST.
Quantity	Item Code	Description	Price Each	Amount
1 EA		Model O.G.S.I. MOGS-100 Oxygen Generating System		\$ 46,809.05
20 EA		H/K 244 C.F. Oxygen Cylinders		
1 EA		High Pressure Steel Braided Transfill Hose-25 Ft		
1 EA		Surge Protector For System		
20 EA		93% Oxygen Cylinder Labels		
1		Onsite Startup and Training Including Travel Expenses		
1		Freight Charges - Delivery to Petersburg, AK		
		Final 50% Payment per Proposal # 09CWR119 - Rev 1		
		TAX ID 601-627-142		
		grant related		
CC: Leon Coral			Total	\$ 46,809.05

OK per Mark  
9/30/2009  
LSTW

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